



14, 2000 accident. Consequently, respondent and its insurance carrier request this Board to reduce claimant's permanent partial general disability to no greater than 10 percent.

Conversely, claimant contends the Board should affirm the finding that claimant has sustained a 28 percent whole body permanent functional impairment as a result of the April 14, 2000 accident. In addition, claimant requests the Board to award him ongoing conservative medical treatment for his bladder and erectile dysfunctions.

The only issue before the Board on this appeal is the nature and extent of claimant's injury and disability.

**FINDINGS OF FACT AND CONCLUSIONS OF LAW**

After reviewing the entire record, the Board finds and concludes:

1. The parties agree that on April 14, 2000, claimant sustained personal injury by accident arising out of and in the course of employment with respondent. On that date, claimant injured his back picking up a saw that weighed approximately 250 pounds. After lifting the saw, claimant initially experienced a sharp pain from his navel to his left testicle. Later, claimant experienced symptoms in his left hip and leg. Respondent and its insurance carrier do not contest that claimant injured his low back in that accident. But they do contest that the accident caused the bladder problems and erectile dysfunction that claimant began experiencing afterwards.
2. Following the accident, claimant noticed that he was urinating more frequently. Claimant initially attributed that problem to the pain that he was experiencing in his left leg. After the accident, claimant also was unable to obtain an erection.
3. After another doctor recommended back surgery, claimant saw board-certified neurological surgeon Dr. Paul S. Stein for a second opinion. Dr. Stein first saw claimant on July 26, 2000, and operated on claimant August 1, 2000, to remove the herniated disc between the fifth lumbar and first sacral (L5-S1) vertebrae. One factor that prompted the doctor to operate on claimant so quickly was the doctor's concern that the disc rupture was a potential source of interference with claimant's bowel and bladder functions. When claimant first saw Dr. Stein, claimant's symptoms had progressed to the point that he had quit working as he was having radiating pain down his left hip and leg, numbness in the left leg and foot and difficulty starting bowel and bladder functions. Additionally, an MRI scan showed a large disc rupture in claimant's low back.
4. Following the disc surgery, Dr. Stein treated claimant through January 3, 2001. After Dr. Stein's treatment ended, claimant next saw Dr. Frederick R. Smith for

follow-up and care. When claimant saw Dr. Smith for the first time on January 24, 2001, claimant did not mention either his bladder problems or erectile dysfunction. But on claimant's third visit with the doctor, claimant mentioned the trouble he was having getting an erection. The doctor noted that claimant was embarrassed to discuss the problem. Dr. Smith referred claimant to a urologist, who, incidentally, did not testify in this claim. Dr. Smith last saw claimant on April 5, 2001.

5. Claimant attributes his bladder problems and erectile dysfunction to the April 2000 accident at work as he had no problems before that incident, other than a urinary tract infection and scrotal infection. Respondent and its insurance carrier have argued that claimant's bladder and erectile dysfunctions were not caused by the accident as claimant did not make ongoing complaints to the various doctors that he saw following the incident. But claimant testified that he was reluctant to tell the doctors about his erectile dysfunction as he was somewhat embarrassed. Moreover, claimant also testified that Dr. Stein told him his bladder problems would probably resolve as his back healed.
6. In early August 2001, Dr. Peter V. Bieri evaluated claimant at his attorney's request. The doctor concluded that claimant's bladder and erectile dysfunctions were related to claimant's accident at work. Using the American Medical Ass'n, *Guides to the Evaluation of Permanent Impairment* (AMA Guides) (4th ed.), the doctor rated claimant as having a 31 percent whole body functional impairment, which included a nine percent whole body functional impairment for urinary bladder dysfunction and a nine percent whole body functional impairment for erectile dysfunction. The remainder of the rating related to claimant's back.
7. In late November 2001, at the Judge's request, claimant saw neurosurgeon Dr. Hish S. Majzoub. Examining the film from a June 2000 MRI, the doctor concluded that following the April 2000 accident claimant had a large herniated disc that compressed the cauda equina, which, in turn, caused claimant's neurogenic bladder and impotence. Dr. Majzoub testified, in part:

Q. (Mr. Laskowski) And your testimony is that by reviewing the film you could identify that there was cauda equina compression?

A. (Dr. Majzoub) Yes, sir.

. . . .

He had a large transverse disc compressing his cauda equina to an almost slit-like area, and it was completely compressed,

you know. It should be round like a bean, and his was almost like a flat area, just completely compressed.

Q. What is the significance of that, Doctor, if any?

A. Whenever you compress the nerve routes that -- see, these are the nerves that go down to your bladder and sex organs, and when they compromise them, then you can lose your bladder control, bowel control, and also your sex control also. They enervate the penis and the rectum and the bladder.

Q. The fact that the MRI demonstrated some compression does not necessarily mean there would be symptoms, is that true, Doctor?

A. Usually whenever it's that bad, yes, we expect symptoms. This is one of the complications of having a large disc in the lumbar spine at that area, is cauda equina compression, one of the complications of disc herniation in that area.<sup>1</sup>

8. Dr. Majzoub rated claimant as having a nine percent whole body functional impairment for the neurogenic bladder, a nine percent whole body functional impairment for the impotence and a 10 percent whole body functional impairment for his back pain and herniated disc. The doctor combined those ratings for a 28 percent whole body functional impairment.
9. Respondent and its insurance carrier deposed Dr. Stein for purposes of this claim. Other than their first meeting, the doctor's office notes do not otherwise disclose that claimant advised the doctor of the bladder or erectile dysfunction problems. Nonetheless, the doctor testified that it was possible to have bladder dysfunction from nerve damage due to a ruptured disc similar to claimant's. The doctor further explained that typical symptoms of such nerve damage are either difficulties initiating a urinary stream or urinary frequency and that such patients may or may not have sexual dysfunction. The doctor also explained that sometimes after surgery and after removing the pressure from the nerves there may be a recovery. Using the *AMA Guides* (4th ed.), the doctor rated claimant's back injury as comprising an eight to nine percent whole body functional impairment.
10. Respondent and its insurance carrier also deposed Dr. Smith. The doctor testified that claimant's large herniated disc made it possible that claimant had bladder and erectile dysfunctions. But the doctor also testified that other causes of erectile

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<sup>1</sup> Majzoub Depo. at 8-9.

dysfunction are side effects from medication, side effects from diabetes and psychological factors. But in this instance, Dr. Smith lacked sufficient information to form an opinion within a reasonable degree of medical certainty whether claimant's alleged sexual dysfunction was related to the April 2000 accident.

11. Assuming claimant's bladder and erectile dysfunctions were related to the April 2000 accident, Dr. Smith testified that claimant sustained a 25 percent whole body functional impairment, which consists of a nine percent whole body functional impairment for sexual dysfunction, nine percent whole body functional impairment for bladder dysfunction and a 10 percent whole body functional impairment for the back injury.
12. Considering the various medical opinions, the Board affirms the Judge's finding that claimant's bladder problems and erectile dysfunction are more probably than not caused by the April 2000 accident and resulting large herniated disc. Accordingly, claimant is entitled to receive workers compensation benefits, including future medical benefits, for those problems.
13. Claimant requests permanent partial general disability benefits based upon his whole body functional impairment rating. The Board finds that claimant has sustained a 25 percent whole body functional impairment due to the disc injury and resulting bladder and erectile dysfunctions. The Board is persuaded by Dr. Smith's testimony as to the appropriate combined rating under the *AMA Guides* when considering all of the components of claimant's injuries. Accordingly, claimant has proven that he has sustained a 25 percent permanent partial general disability due to the April 14, 2000 accident.

### **AWARD**

**WHEREFORE**, the Board modifies the May 7, 2002 Award and reduces claimant's permanent partial general disability from 28 percent to 25 percent.

Dean E. Base is granted compensation from Blanchat Machine Company, Inc., and its insurance carrier for an April 14, 2000 accident and resulting disability. Based upon an average weekly wage of \$529.21, Mr. Base is entitled to receive 13.76 weeks of temporary total disability benefits at \$352.82 per week, or \$4,854.80, plus 103.75 weeks of permanent partial general disability benefits at \$352.82 per week, or \$36,605.08, for a 25 percent permanent partial general disability, making a total award of \$41,459.88, which is all due and owing less any amounts previously paid.

The Board awards claimant ongoing conservative medical benefits for treatment of his bladder and erectile dysfunctions. Nonetheless, in the event treatment other than

conservative medical treatment is needed, claimant is required to make proper application to the Director.

The Board adopts the remaining orders set forth in the May 7, 2002 Award to the extent they are not inconsistent with the above.

**IT IS SO ORDERED.**

Dated this \_\_\_\_ day of August 2003.

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BOARD MEMBER

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BOARD MEMBER

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BOARD MEMBER

c: Kelly W. Johnston, Attorney for Claimant  
Ronald J. Laskowski, Attorney for Respondent and its Insurance Carrier  
John D. Clark, Administrative Law Judge  
Paula S. Greathouse, Workers Compensation Director